

and machine tool shops. They are closing and selling. From North Carolina, public auction. Plant closing. Everything must sell. From Marion, Ohio, complete shop close-out auction. From Cuyahoga Falls, Ohio, in my district, absolute auction. Everything is going. From Scottsboro, Alabama, precision job shop downsizing. Another one here for a CNC machining tool room and production machinery. Excess equipment due to corporate outsourcing.

Excess equipment due to corporate outsourcing. President Bush's top economic adviser the other day said outsourcing is a good thing when these plants move overseas and they ship jobs overseas, because it makes our businesses more efficient. Tell that to the 50 or 60 workers that worked at this plant when the owners of this plant say excess equipment, we are selling due to corporate outsourcing.

From Massachusetts, a large-capacity fabricating and machine shop closing. Another one from Chicago. Six CNC lathes, 12 chucks, 22 bar machines sold. Surplus to the continuing operations. They have lost businesses and they are selling most of their equipment. Here is another one. Three days, two tremendous public auctions. Machinery, equipment, and real estate. Plant's closed, everything must go. Real estate for sale. Here is another one that says Dominion Castings Foundry, equipment machine facility. Plant closed, everything sells. Another one from Baltimore, Maryland. Complete facility selling. Another, 5-day public auction. Plant closing due to relocation. Another one, on and on and on. This company is closing for the same reasons.

Now, Mr. Speaker, it is bad enough that these places are closing and the President's response is more tax cuts. That is not working. More trade agreements hemorrhaging jobs overseas. That is not working. That is bad enough, but there are 800,000 Americans whose unemployment compensation has expired in the last 3 months. That is 800,000 workers, 800,000 families living in communities around this country; and the President and this Congress, the Republican leadership in this Congress, will not extend their unemployment compensation. That is morally wrong. It is bad for our country, it is bad for our communities, it is bad for our families, and it is bad for our workers.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Idaho (Mr. OTTER) is recognized for 5 minutes.

(Mr. OTTER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

RURAL VETERANS HEALTH CARE

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan (Mr. STUPAK) is recognized for 5 minutes.

Mr. STUPAK. Mr. Speaker, I rise tonight in support of rural veterans and in support of H.R. 2379, the Rural Veterans Access to Care Act of 2003. I would like to thank the gentleman from Nebraska (Mr. OSBORNE) for his leadership on this issue.

No veteran should ever have reason to doubt America's gratitude for his or her service to the Nation and to the cause of freedom. America's veterans deserve nothing less than our highest gratitude, our deepest respect, and our strongest support. Veterans from rural areas, like my district, deserve nothing less than their comrades living in more populated areas.

Michigan's First Congressional District has the highest population in any congressional district in Michigan. There are 65,000 veterans in my district, one-fifth of all the veterans in the State of Michigan.

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They live over a huge area. The Upper Peninsula alone spans 450 miles from east to west. While the VA provides wonderful care in northern Michigan, it is far too hard for veterans to access health care. Recently, a Vietnam veteran from the Upper Peninsula had to go to Milwaukee, Wisconsin, for the treatment that he needed. Milwaukee is a long way from home, so our veterans go as far as the Iron Mountain VA Medical Center, and they spend the night there. The next day they are put on a bus and they are shipped down to Milwaukee, Wisconsin. And that is repeated once their treatment is done, whether it is 1, 2 or 3 days. They are put back on a bus, they go back to Iron Mountain, Michigan, and then they spend the night and go on home.

It is outrageous that they have to travel so many miles, in some case 450 miles, just to get treatment. At best the distance is an inconvenience. At worst, it puts veterans' lives at serious risk. I had another case where a retired Navy veteran from Sault Ste. Marie had surgery at the VA Medical Center in Milwaukee to treat his cancer. After surgery, he was transported via van all of the way back to Sault Ste. Marie, 379 miles away. The next morning, his spouse had to take him to the emergency room in Sault Ste. Marie, Michigan, and the emergency room could not help him. The nearest VA medical center in Iron Mountain could not help him either, so he had once again to be shipped by ambulance 379 miles down to Milwaukee, Wisconsin.

Mr. Speaker, we cannot have veterans being shipped back and forth across state lines. It is dangerous, and it is just not right. These two constituents represent the challenges faced every day by rural veterans across this country. Congress needs to act to address the specific needs of rural veterans. That is why I am a cosponsor of H.R. 2379, the Rural Veterans Access to Care Act of 2003. The legislation would allow veterans to enroll in an option to

seek routine health care closer to home.

H.R. 2379 sets aside 5 percent of each VA region's medical care allocation to be used for routine medical care for highly rural or geographically remote veterans. The legislation would allow rural veterans to be closer to their health care providers, rather than traveling hundreds of miles for an appointment at the VA, which could be especially dangerous during inclement weather.

In Michigan, I will also continue to work to open a community-based outpatient clinic in Gladstone. Over 2 years ago, the VA announced to open the CBOC, as we call them, in Gladstone. Yet during every successive round of CBOC openings across the country, somehow our region just cannot seem to get Gladstone funded. It is estimated a Gladstone CBOC would provide much needed basic health care to our veterans, in fact, to approximately 750 veterans alone in its first year of operation. This facility is critical towards keeping our promise to those who serve our country so well.

I think today, Americans have a deeper understanding of the sacrifices of our military personnel than at any time in recent history. Our commitment to veterans must be more than just waving the American flag in times of armed conflict and recognizing them on national holidays. We owe it to our veterans to do more. We must be prepared to take their battle-borne scars of war and military service throughout their lifetime, and make sure they have the quality of service they need.

Today I was visited by a couple from Chassel, Michigan, representing the VFW. They handed me the VFW's priorities for the coming year. We can see here the VFW priority goals for 2004. It says veterans health care now, we earned it. If you look at it, it says the number one priority of veterans is health care. They say underfunding of the VA budget, 6-month waits to see a doctor, denial of care to category 8 veterans, little or no long-term care, little or no mental health care, and millions of fed-up veterans.

Well, those of us who represent rural areas, and no matter where veterans are, we believe they should be taken care of. There are special challenges for rural veterans, and we stand here tonight to urge this Congress to pass H.R. 2379 to take care of all of our veterans, but especially those of us who have veterans who live in our rural districts.

CARBON DIOXIDE CONTRIBUTES TO CLIMATE CHANGE

The SPEAKER pro tempore (Mr. BURGESS). Under a previous order of the House, the gentleman from Maryland (Mr. GILCHREST) is recognized for 5 minutes.

Mr. GILCHREST. Mr. Speaker, I did not come here to talk about veterans, but I will add my voice to the chorus of